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IN RE:		Case No
Carr, Darius Allen Jr. & Carr, Me	elinda Cheryl	Chapter 7
	Debtor(s)	
	VERIFICATION OF CREDITOR M.	ATRIX
The above named debtor(s) here	eby verify(ies) that the attached matrix listing cre	ditors is true to the best of my(our) knowledge.
Date: February 6, 2020	Signature: /s/ Darius Allen Carr, Jr.	
<u>-</u> -	Darius Allen Carr, Jr.	Debtor
Date: February 6, 2020	Signature: /s/ Melinda Cheryl Carr	
- www	Melinda Cheryl Carr	Joint Debtor, if any

Ability Recovery Services LLC PO Box 4262 Scranton, PA 18505-6262

Ally Financial 500 Woodward Ave Detroit, MI 48226-3416

AMCA PO Box 1235 Elmsford, NY 10523-0935

ARH Beckley Hospital 306 Stanaford Rd Beckley, WV 25801-3142

Ashwood Financial PO Box 47707 Indianapolis, IN 46247-0707

AT&T PO Box 536216 Atlanta, GA 30353-6216

Atkins & Ogle Law Offices LLC PO Box 300 Buffalo, WV 25033-0300

Auto Credie Now LLC 4631 Robert C Byrd Dr Beckley, WV 25801-8180

Avante USA 3600 S Gessner Rd Ste 225 Houston, TX 77063-5357

C&F Finance Company PO Box 2129 Richmond, VA 23218-2129

Capital One Bank PO Box 6492 Carol Stream, IL 60197-6492

Cassis Dental Center PLLC PO Box 926 Fayetteville, WV 25840-0926

Cavalry Portfolio Services PO Box 27288 Tempe, AZ 85285-7288

Circuit Court of Fayette County, WV 100 N Court St Fayetteville, WV 25840-1200

Citibank PO Box 9001037 Louisville, KY 40290-1037

City National Bank 3601 Maccorkle Ave SE Charleston, WV 25304-1421

Cleveland Clinic 18901 Lake Shore Blvd Euclid, OH 44119-1078

CNAC

ATTN: WV108 4631 Robert C Byrd Dr Beckley, WV 25801

Collegiate Housing Services 5175 E 65th St Indianapolis, IN 46220-4816

Credence Resource Management LLC PO Box 2390 Southgate, MI 48195-4390

Credit Bureau Systems Inc. PO Box 11788 Lexington, KY 40578-1788 Credit Collection Services PO Box 55126 Boston, MA 02205-5126

Credit Collections USA 16 Distributor Dr Ste 1 Morgantown, WV 26501-7209

Credit Control LLC PO Box 100 Hazelwood, MO 63042-0100

Credit One Bank PO Box 98878 Las Vegas, NV 89193-8878

Credit One Bank PO Box 60500 City of Industry, CA 91716-0500

DIRECTV PO Box 105261 Atlanta, GA 30348-5261

Diversified Consultants Inc PO Box 551268 Jacksonville, FL 32255-1268 EOS CC PO Box 981025 Boston, MA 02298-1025

Fayette County National Bank PO Box 209 Fayetteville, WV 25840-0209

FBCS 330 S Warminster Rd Ste 353 Hatboro, PA 19040-3433

Fred A. Jesser, Esquire PO Box 450 Fayetteville, WV 25840-0450

Frontline Asset Strategies, LLC 2700 Snelling Ave N Ste 250 Roseville, MN 55113-1783

I.C. System, Inc.
PO Box 64378
Saint Paul, MN 55164-0378

JH Portfolio Debt Equities LLC 5757 Phantom Dr Ste 225 Hazelwood, MO 63042-2429

Laboratory Corporation of America PO Box 2240 Burlington, NC 27216-2240

Lincare Inc.
PO Box 105760
Atlanta, GA 30348-5760

Lowe's/Synchrony Bank PO Box 530914 Atlanta, GA 30353-0914

LVNV Funding LLC PO Box 10497 Greenville, SC 29603-0497

Mark S. Younis, MD 122 Pinnell St Ripley, WV 25271-9101

Martin & Seibert PO Box 1085 Martinsburg, WV 25402-1085

Midland Credit Management, Inc. PO Box 60578 Los Angeles, CA 90060-0578 Midland Credit Management, Inc. PO Box 51319
Los Angeles, CA 90051-5619

New River Health Association PO Box 337 Scarbro, WV 25917

Oak Hill Emergency Physicians 300 S Park Rd Ste 400 Hollywood, FL 33021-8353

OneMain Financial Inc. 601 NW 2nd St Evansville, IN 47708-1013

Orthopaedic & Spine Surgery Assoc. 215 Brookshire Ln Beckley, WV 25801-6729

Pendrick Capital Partners LLC 1714 Hollinwood Dr Alexandria, VA 22307-1926

Phoenix Financial Services LLC PO Box 361450 Indianapolis, IN 46236-1450

Plateau Medical Center 430 Main St Oak Hill, WV 25901-3484

Portfolio Recovery Associates, LLC PO Box 12914 Norfolk, VA 23541-0914

Professional Account Services PO Box 188
Brentwood, TN 37024-0188

Professional Anesthesia Services Inc. PO Box 1506 Charleston, WV 25325-1506

Progressive Leasin 256 W Data Dr Draper, UT 84020-2315

Receivables Performance Management LLC PO Box 1548 Lynnwood, WA 98046-1548

Suddenlink PO Box 742535 Cincinnati, OH 45274-2535 Sunrise Credit Services, Inc. PO Box 9100 Farmingdale, NY 11735-9100

Synchrony Bank/Tire Pros PO Box 960061 Orlando, FL 32896-0061

Vaught Neurological Services PLLC PO Box 5366 Beckley, WV 25801-7504

Verizon Wireless PO Box 25505 Lehigh Valley, PA 18002-5505

Walmart/Synchrony Bank PO Box 530927 Atlanta, GA 30353-0927

WebBank/Fingerhut PO Box 0260 Saint Cloud, MN 56395-0260

William A. Klenk, DDS PO Box 497 Hico, WV 25854-0497

B201B (Form 2018) 2:20 -bk-20051 D

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Desc Main

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Southern District of West Virginia, Beckley Division

IN RE:	Case No
Carr, Darius Allen Jr. & Carr, Melinda Cheryl	Chapter 7
Debtor(s)	•
CERTIFICATION OF NOTICE TO	O CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BA	ANKRUPTCY CODE

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached

notice, as required by § 342(b) of the Bankruptcy Code.	
Drintad Name and title, if any, of Rankruptay Patition Properer	Social Socurity number (If the hankrunter)

Printed Name and title, if any, of Bankruptcy Petition Preparer	Social Security number (If the bankruptcy
Address:	petition preparer is not an individual, state
	the Social Security number of the officer,
	principal, responsible person, or partner of
	the bankruptcy petition preparer.)
x	(Required by 11 U.S.C. § 110.)
Signature of Rankruptey Potition Property of officer, principal, responsible po	roon or

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Carr, Darius Allen Jr. & Carr, Melinda Cheryl	X /s/ Darius Allen Carr, Jr.	2/06/2020
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X /s/ Melinda Cheryl Carr	2/06/2020
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Fill in th	nis information to identif	y your case:		
Debtor 1	Darius Allen Carr			
202101	First Name	Middle Name	Last Name	
Debtor 2	Melinda Cheryl C	arr		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DIS	STRICT OF WEST VIRGINIA, BECKLEY	
Case number				
(if known)				Check if this is an amended filing
Official Fo		n for Indi	ividuals Filing Under Chapte	er 7 12/15
	ividual filing under chap e claims secured by you		Il out this form if:	
You must file thi	ever is earlier, unless the	thin 30 days after	not expired. you file your bankruptcy petition or by the date set f he time for cause. You must also send copies to the c	
•	eople are filing together	in a joint case, bo	oth are equally responsible for supplying correct info	rmation. Both debtors must sign
write y	and accurate as possible our name and case num	ber (if known).	s needed, attach a separate sheet to this form. On the	top of any additional pages,
1. For any credit information be		rt 1 of Schedule D	D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the
	reditor and the property th	nat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	City National Bank		☐ Surrender the property.	□ No
name:	,		☐ Retain the property and redeem it.	_ 110
Description of			☐ Retain the property and enter into a <i>Reaffirmation Agreement</i> .	Yes
property securing debt:	Fayetteville, WV 25	5840-6788	Retain the property and [explain]: Retain and pay pursuant to contract	_
				_
For any unexpire the information I	below. Do not list real es	se that you listed tate leases. Unex	I in Schedule G: Executory Contracts and Unexpired pired leases are leases that are still in effect; the lease trustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your u	unexpired personal prop	erty leases		Will the lease be assumed?
Lessor's name:		J. 19 100000		□ No
Description of lea Property:	ased			☐ Yes
Lessor's name:				□ No
Description of lea	ased			_
Property:				☐ Yes

Official Form 108

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Debtor 1 Debtor 2 Carr, Darius Allen Jr. & Carr, Melinda Cheryl	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about property that is subject to an unexpired lease.	t any property of my estate that secures a debt and any personal
X /s/ Darius Allen Carr, Jr. X	/s/ Melinda Cheryl Carr
Darius Allen Carr, Jr. Signature of Debtor 1	Melinda Cheryl Carr Signature of Debtor 2
Date February 6, 2020	February 6, 2020

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF WEST VIRGINIA, BECKLEY DIVISION	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Darius	Melinda
	your government-issued picture identification (for	First name	First name
	example, your driver's license or passport).	Allen	Cheryl
	,	Middle name	Middle name
	Bring your picture identification to your meeting	Carr, Jr. Last name and Suffix (Sr., Jr., II, III)	Carr Last name and Suffix (Sr., Jr., II, III)
	with the trustee.	Last Harrie and Sunix (St., St., II, III)	Last Hairle and Sulfix (St., St., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal	2000	2404
	Individual Taxpayer Identification number (ITIN)	xxx-xx-3020	xxx-xx-3184

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Debtor 1 Debtor 2

Carr, Darius Allen Jr. & Carr, Melinda Cheryl

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		206 Pleasant View Rd Fayetteville, WV 25840-6788			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		<u>Fayette</u> County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Debtor 2

Carr, Darius Allen Jr. & Carr, Melinda Cheryl

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Cha	pter 7					
		☐ Cha	pter 11					
		☐ Cha	pter 12					
		☐ Cha	pter 13					
8.	How you will pay the fee	– a If	bout how yo	u may pay. Typica ey is submitting yo	ally, if you are paying the fee yours	with the clerk's office in your local court for more details elf, you may pay with cash, cashier's check, or money c ttorney may pay with a credit card or check with a		
						sign and attach the Application for Individuals to Pay 7		
			J	Installments (Official Form 103A). Lat my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a				
		n y	ot required to our family si	o, waive your fee, ze and you are una	and may do so only if your income	e is less than 150% of the official poverty line that applie. If you choose this option, you must fill out the <i>Applicat</i>		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.						
	an anniate?		Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.				
	residence :	☐ Yes.	Has yo	our landlord obtair	ned an eviction judgment against	you?		
				No. Go to line 12	2.			
						dgment Against You (Form 101A) and file it as part of the		

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Debtor	1	
D = l= 4 =	2	

Carr, Darius Allen Jr. & Carr, Melinda Cheryl

Par	Report About Any Bus	sinesses \	ou Own	as a Sole Proprieto	r
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	oer, Street, City, Stat	e & ZIP Code
	to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-flo	dicate that you are a sow statement, and fed	court must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	I am r	not filing under Chap	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?	
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
	•				Number, Street, City, State & Zip Code

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Debtor 1 Debtor 2

Carr, Darius Allen Jr. & Carr, Melinda Cheryl

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Debtor 2

Carr, Darius Allen Jr. & Carr, Melinda Cheryl

16.	What kind of debts do	16a.				defined in 11 U.S.C.§ 101(8) as "incurred b	y an		
	you have?		individual primarily for a personal ☐ No. Go to line 16b.	, ramily, or nousenol	a purpose."				
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money						
		100.	for a business or investment or the						
			□ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe that are not consumer debts or business debts						
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	■ 1-49		1 ,000-5,000		2 5,001-50,000			
	you estimate that you owe?	□ 50-99		<u></u> 5001-10,000		<u></u> 50,001-100,000			
		☐ 100-19 ☐ 200-99	· -	□ 10,001-25,0	00	☐ More than100,000			
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 ·	· \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	\$50,00	01 - \$100,000	\$10,000,001		□ \$1,000,000,001 - \$10 billion			
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 □ \$100,000,00		□ \$10,000,000,001 - \$50 billion □ More than \$50 billion	ı		
20.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 ·	· \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?	\$50,00	01 - \$100,000	□ \$10,000,001	- \$50 million	□ \$1,000,000,001 - \$10 billion			
	ъс.		001 - \$500,000	□ \$50,000,001 □ \$100,000,00		□ \$10,000,000,001 - \$50 billion □ More than \$50 billion	n		
	<u></u>	\$500,0	001 - \$1 million	5100,000,00	71 - \$500 millior	i More than \$50 billion			
Par									
For	you	I have exa	have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	relief in accordance with the chap	oter of title 11, Unite	d States Code,	, specified in this petition.			
		case can			to 20 years, or i	y or property by fraud in connection with a ba both. 18 U.S.C. §§ 152, 1341, 1519, and 357 Cheryl Carr			
		Darius A	Allen Carr, Jr. of Debtor 1		Melinda Ch Signature of D	eryl Carr			
		Executed	on February 6, 2020 MM / DD / YYYY		Executed on	February 6, 2020 MM / DD / YYYY			

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Debtor 1 Debtor 2

Carr, Darius Allen Jr. & Carr, Melinda Cheryl

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ William R. Wooton	Date	February 6, 2020	
Signature of Attorney for Debtor		MM / DD / YYYY	,
William R. Wooton			
Printed name			
Wooton & Wooton			
Firm name			
210 Main St			
Beckley, WV 25801-4613			
Number, Street, City, State & ZIP Code			
Contact phone	Email address	bill@wootonlaw.com	
- Contact phone		biii@wootomaw.com	
4139			
Bar number & State			

1.1	206 Pleasant V Street address, if availa Fayetteville City Fayette County		25840-6788 ZIP Code	Who	Single-family Duplex or mul Condominium Manufactured Land Investment provinces Other has an interest Debtor 1 only Debtor 2 only Debtor 1 and At least one of information y enty identification	Iti-unit building or cooperative or mobile home operty t in the property? Checo Debtor 2 only of the debtors and anoth ou wish to add about	her this item,	Current val entire prop \$6 Describe tt (such as fe a life estate Check (see ins	of any secure //ho Have Clair lue of the elerty? 60,000.00 ne nature of yet esimple, tende), if known.	Cu po or ancy	
1.1	Fayetteville City Fayette	wv	25840-6788	Who	Single-family Duplex or mul Condominium Manufactured Land Investment provinces Other has an interest Debtor 1 only Debtor 2 only Debtor 1 and At least one of information y enty identification	home Iti-unit building or cooperative or mobile home operty It in the property? Checo Debtor 2 only of the debtors and anoth ou wish to add about on number:	her this item,	Current val entire prop \$6 Describe tt (such as fe a life estate Check (see ins	of any secure //ho Have Clair lue of the elerty? 60,000.00 ne nature of yet esimple, tende), if known.	Cu po or ancy	ms on Schedule D: coured by Property. Irrent value of the rtion you own? \$60,000.00 ownership interest by the entireties, or ity property
1.1	Fayetteville City Fayette	wv	25840-6788		Single-family Duplex or mul Condominium Manufactured Land Investment pro Timeshare Other has an interest Debtor 1 only Debtor 2 only	home Iti-unit building or cooperative or mobile home operty t in the property? Check	_	Current valentire prop	of any secure /ho Have Clair lue of the serty? 60,000.00 ne nature of y se simple, ten	cd claii ms Se Cu po	ms on Schedule D: ecured by Property. errent value of the rtion you own? \$60,000.00
1.1	Street address, if availar Fayetteville City	wv	25840-6788		Single-family Duplex or mul Condominium Manufactured Land Investment pri Timeshare Other has an interest	home Iti-unit building or cooperative or mobile home	_	Current valentire prop	of any secure /ho Have Clair lue of the serty? 60,000.00 ne nature of y se simple, ten	cd claii ms Se Cu po	ms on Schedule D: ecured by Property. errent value of the rtion you own? \$60,000.00
1.1	Street address, if availa	wv	25840-6788		Single-family Duplex or mul Condominium Manufactured Land Investment pro Timeshare	home Iti-unit building or cooperative or mobile home		Current valentire prop	of any secure /ho Have Clair lue of the serty? 60,000.00 ne nature of y se simple, ten	cd claii ms Se Cu po	ms on Schedule D: ecured by Property. errent value of the rtion you own? \$60,000.00
1.1	Street address, if availa	wv	25840-6788		Single-family Duplex or mul Condominium Manufactured Land Investment pre	home Iti-unit building or cooperative or mobile home		the amount Creditors W Current val entire prop	of any secure /ho Have Clair lue of the perty?	d clair ms Se	ms on Schedule D: ecured by Property. urrent value of the rtion you own?
1.1	Street address, if availa	ble, or other des		■	Single-family Duplex or mul Condominium Manufactured	home Iti-unit building or cooperative		the amount Creditors W Current val	of any secure /ho Have Clair lue of the	d clair ms Se	ms on Schedule D: ecured by Property.
1.1			cription	■	Single-family Duplex or mul	home Iti-unit building		the amount	of any secure	d claii	ms on Schedule D:
1.1	206 Pleasant V	iew Rd		What	Single-family	home					
1.1				What	is the property	y? Check all that apply					
	Yes. Where is the pr	roperty?									
	No. Go to Part 2.										
1. D e	o you own or have ar	ny legal or equ	uitable interest in ar	ıy reside	ence, building,	land, or similar prope	erty?				
nfor	mation. If more spac wer every question.	e is needed, a	attach a separate sh	eet to th	is form. On the	or or Have an Interest	ıl pages, wi				
n ea	ch category, separat	ely list and de	escribe items. List a			n asset fits in more the are filing together, be					
_	ficial Form	_	-								12/15
- Cas						_				Ц	Check if this is a amended filing
	se number	•								П	Object Materials
Uni	ted States Bankrupt	cy Court for		N DISTI	RICT OF WES	ST VIRGINIA, BECK	KLEY				
(Spo		st Name		Name		Last Name					
	otor 2 M	elinda Che		Name		Last Name					
Deb	FIR	st Name		Name		Last Name		\			
		arius Allen	Carr .lr								
	otor 1 Da	arius Allen	dentify your case	and th	is filing:						

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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. Cal	s, vans, trucks, tractors, sport utility ve	hicles, motorcycles		
	lo.			
- \				
3.1	Make:	Who has an interest in the property? Check one	Do not deduct secured cl the amount of any secure	
	Model:	Debtor 1 only	Creditors Who Have Clair	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	2007 Ford Focus	Check if this is community property (see instructions)	\$1,000.00	\$1,000.00
3.2	Make:	Who has an interest in the property? Check one	Do not deduct secured cl	
	Model:	■ Debtor 1 only	the amount of any secure Creditors Who Have Clai	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	☐ At least one of the debtors and another		
	1990 Ford F150	_	¢4 500 00	¢4 500 00
		☐ Check if this is community property (see instructions)	\$1,500.00	\$1,500.00
3.3	Make:	Who has an interest in the property? Check one	Do not deduct secured cl	
	Model:	■ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only	Current value of the	
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another		
	1991 Ford F250 (titled in Debtor	_	*** *** *** *** ***	#0.000.00
	1's name, belongs to son)	☐ Check if this is community property (see instructions)	\$2,000.00	\$2,000.00
3.4	Make:	Who has an interest in the property? Check one	Do not deduct secured cl	
	Model:	■ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	1976 Ford F350	Check if this is community property (see instructions)	\$1,200.00	\$1,200.00

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

	btor 1	Case 2:20-b			Filed 02/07 Document		Entered (je 23 of 7	2		Desc Main
6. I	Exam	hold goods and for ples: Major appliance	urnishings					Case number	(if known)	
	□ No ■ Yes	s. Describe							7	
			valued at I GE Microv & 6 Chairs Size Bed/M	more than vave - \$15; s - \$100; Ki Mattress/Be ess/Boxsp	ehold goods & \$ \$400) including Frigidaire Stov tchen Cabinet - oxspring - \$50; ring - \$75; 2 Dre	j: Whirl re - \$25 \$20; B Queen	pool Refrige ; Sectional - ook Shelf - S Size	erator - \$50; · \$50; Table \$20; Full		\$500.00
	□ No	ples: Televisions ar	nd radios; audic phones, came			ment; cor	nputers, printe	rs, scanners; m	usic collection	s; electronic devices
	_ 100	3. Describe	Samsung	TV - \$50; 2	iPhones - \$200)				\$250.00
	Exam _l ■ No		figurines; paint nemorabilia, co		or other artwork; boo	oks, pictu	res, or other ar	t objects; stamp	o, coin, or base	eball card collections; other
	Exam _l ■ No	ment for sports ar ples: Sports, photoginstruments		se, and other	hobby equipment; t	oicycles, p	oool tables, gol	f clubs, skis; ca	anoes and kaya	aks; carpentry tools; musical
	□ No	mples: Pistols, rifles	s, shotguns, an	nmunition, ar	nd related equipme	nt				
	_ 103	5. Describe	.40 Calibe	r Glock						\$400.00
	□ No		othes, furs, leath	her coats, des	signer wear, shoes,	accesso	ries			
			Clothes							\$200.00
	□ No	•			gement rings, wedd	ling rings	, heirloom jewe	lry, watches, ge	ems, gold, silve	
			Wedding F	kings						\$75.00
	<i>Exar</i> □ No	f arm animals <i>mples:</i> Dogs, cats, l	birds, horses							
	■ Yes	s. Describe	Black & W Cat - \$20	/hite Dog -	\$75; Brown & E	Black C	at - \$20; Gre	ey & White]	\$115.00

14. Any other personal and household items you did not already list, including any health aids you did not list \square No

Official Form 106A/B Schedule A/B: Property page 3

Case 2:20-bk-20051 Doc 1 Filed 02/07/20 Entered 02/07/20 13:44:38 Desc Main Page 24 of 72 Document Debtor 1 Carr, Darius Allen Jr. & Carr, Melinda Cheryl Case number (if known) Debtor 2 Yes. Give specific information..... Carpentry Tools \$100.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for \$1,640.00 Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Checking Account - Bank of Mount Hope,** 835 Main Street E, Oak Hill, WV 25901 \$245.30 Checking Account 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No \square Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)No

Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

		Case 2:20-bk-20051	Doc 1	Document	Page 25 of 7	02/07/20 13:44:38 2	Desc Main
	ebtor 1 ebtor 2	Carr, Darius Allen Jr. 8	Carr, Melin	nda Cheryl	J	Case number (if known)	
	■ No						
	Yes	Institution name	and descripti	on. Separately file the	e records of any intere	sts.11 U.S.C. § 521(c):	
25.	Trusts,	equitable or future interests	in property (other than anythin	g listed in line 1), an	d rights or powers exercisa	able for your benefit
	☐ Yes.	Give specific information about	ut them				
26.		, copyrights, trademarks, tra les: Internet domain names, we				s	
	☐ Yes.	Give specific information about	ut them				
27.		es, franchises, and other ger les: Building permits, exclusive			holdings, liquor licenso	es, professional licenses	
	☐ Yes.	Give specific information about	ut them				
M	oney or p	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		unds owed to you					
	□ No ■ Yes. (Give specific information about	them includir	ng whether you alread	dy filed the returns and	the tax years	
			,				
			Anticip	pated 2019 Feder	al Tax Refund	Federal	\$9,500.00
						\neg	
			Anticip	pated 2019 State	Tax Refund	State	\$600.00
	■ No	support les: Past due or lump sum alir Give specific information					<u></u>
	Example No See	<i>les:</i> Past due or lump sum alir	mony, spousal	support, child supp	ort, maintenance, divo	orce settlement, property sett	element
30.	Example No Yes. C	les: Past due or lump sum alir Give specific information mounts someone owes you les: Unpaid wages, disability in	mony, spousal	support, child supp	ort, maintenance, divo	orce settlement, property sett	element
30.	Example No Yes. C Other as Example No Yes. C	les: Past due or lump sum alir Give specific information mounts someone owes you les: Unpaid wages, disability in unpaid loans you made to	mony, spousal surance paym o someone els	I support, child supp nents, disability benef se	ort, maintenance, dive	pay, workers' compensation	element
30.	Example No Yes. C Other at Example No Yes. C	des: Past due or lump sum alir Give specific information mounts someone owes you des: Unpaid wages, disability in unpaid loans you made to Give specific information s in insurance policies des: Health, disability, or life insurance company of	mony, spousal surance paym o someone els	l support, child supp nents, disability benef se	ort, maintenance, dive	pay, workers' compensation,	element
30.	Example No Yes. C Other as Example No Yes. C Interest Example No Yes. No Any interest	des: Past due or lump sum alir Give specific information mounts someone owes you des: Unpaid wages, disability in unpaid loans you made to Give specific information s in insurance policies des: Health, disability, or life insurance company of	mony, spousal asurance paym to someone els surance; health of each policy ny name:	support, child supponents, disability benefice a savings account (Hand list its value.	ort, maintenance, divenits, sick pay, vacation SA); credit, homeowned	pay, workers' compensation, er's, or renter's insurance	Surrender or refund value:
30. 31.	Example No Yes. C Other as Example No Yes. C Interest Example No Yes. No Any interity you as died. No	des: Past due or lump sum alir Give specific information mounts someone owes you des: Unpaid wages, disability in unpaid loans you made to Give specific information is in insurance policies des: Health, disability, or life ins Name the insurance company of Compa	mony, spousal asurance paym to someone els surance; health of each policy ny name:	support, child supponents, disability benefice a savings account (Hand list its value.	ort, maintenance, divenits, sick pay, vacation SA); credit, homeowned	pay, workers' compensation, er's, or renter's insurance	Surrender or refund value:
31.	Example No Yes. C Other as Example No Yes. C Interest Example No Yes. No Yes. No Any intellifyou as died. No Yes. C	des: Past due or lump sum alir Give specific information mounts someone owes you des: Unpaid wages, disability in unpaid loans you made to Give specific information is in insurance policies des: Health, disability, or life insurance company of Compa erest in property that is due tre the beneficiary of a living true	mony, spousal surance paymon someone els surance; health of each policy ny name: you from sor list, expect products and someone els surance; health of each policy ny name:	ents, disability benefice and list its value. meone who has die ceeds from a life insu	ort, maintenance, divention its, sick pay, vacation Benefic d urance policy, or are contained to made a demand	pay, workers' compensation, er's, or renter's insurance ciary:	Surrender or refund value:

Official Form 106A/B Schedule A/B: Property page 5

	Case 2:20-bk-20051	Doc 1	Filed 02/07/20 Document F) Entered Page 26 of	l 02/07/20 13:44:38 72	Desc Main
Debt Debt	Cour Douitio Allon In 9	Carr, Meli			Case number (if known)	
•	Other contingent and unliquidated of No I No I Yes. Describe each claim	laims of eve:	ery nature, including c	ounterclaims of	the debtor and rights to set	off claims
35. A	any financial assets you did not alro	eady list				
	l No	•				
	Yes. Give specific information		201 116 - 5 14			
		garnishn	withheld from Debto nent within 90 days ting a preference			\$2,000.00
36.	Add the dollar value of all of your Part 4. Write that number here					\$12,345.30
Part !	Describe Any Business-Related Pro	perty You Ow	vn or Have an Interest In.	List any real esta	te in Part 1.	
	o you own or have any legal or equitable	le interest in a	any business-related prop	erty?		
	No. Go to Part 6.					
	Yes. Go to line 38.					
	If you own or have an interest in farml o you own or have any legal or equal No. Go to Part 7. Yes. Go to line 47.	and, list it in Pa	est in any farm- or con	nmercial fishing		
Part 1	7: Describe All Property You Own	n or Have an I	nterest in That You Did N	ot List Above		
	Do you have other property of any less Examples: Season tickets, country cludes No					
	Yes. Give specific information					
54.	Add the dollar value of all of your	entries from	Part 7. Write that num	ber here		\$0.00
Part 8	8: List the Totals of Each Part of the	nis Form				
55.	Part 1: Total real estate, line 2					\$60,000.00
56.	Part 2: Total vehicles, line 5			\$5,700.00		
57.	Part 3: Total personal and househouse	old items, lir	ne 15	\$1,640.00		
58.	Part 4: Total financial assets, line	36		\$12,345.30		
59.	Part 5: Total business-related prop	perty, line 45		\$0.00		
	Part 6: Total farm- and fishing-rela		y, line 52	\$0.00		
61.	Part 7: Total other property not lis	ted, line 54	+	\$0.00		
62.	Total personal property. Add lines	56 through 6	1	\$19,685.30	Copy personal property total	\$19,685.30
63.	Total of all property on Schedule	VB . Add line	55 + line 62			\$79,685.30

Official Form 106A/B Schedule A/B: Property page 6

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		Docume	<u>ni Page // 01// </u>		
Fill in th	nis information to identi	fy your case:			
Debtor 1	Darius Allen Car	r, Jr.			
	First Name	Middle Name	Last Name)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT DIVISION	OF WEST VIRGINIA, BECKLEY		
Case number (if known)					Check if this is an amended filing
					-

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming?	? Check one only, even	if you	r spouse is filing with you.	
	You are claiming state and federal nonbankr	ruptcy exemptions. 11	U.S.C	. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 U.	.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exer	npt, f	ill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
De	ebtor 1 Exemptions				
	206 Pleasant View Rd	\$60,000.00		\$11,862.00	WVC § 38-10-4(a)
	Fayetteville WV, 25840-6788 County: Fayette Line from Schedule A/B 1.1			100% of fair market value, up to any applicable statutory limit	
	2007 Ford Focus	\$1,000.00		\$1,000.00	WVC § 38-10-4(b)
	Zino nom so, requie , v.z. Sin			100% of fair market value, up to any applicable statutory limit	
	1990 Ford F150 Line from Schedule A/B 3.2	\$1,500.00		\$200.00	WVC § 38-10-4(b)
	Ellie Holli Genedale A/B G.2			100% of fair market value, up to any applicable statutory limit	
	1990 Ford F150 Line from Schedule A/B 3.2	\$1,500.00		\$1,300.00	WVC § 38-10-4(e)
	Ellic Hoth Goriodale 7/D. G.Z			100% of fair market value, up to any applicable statutory limit	

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			9	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
1991 Ford F250 (titled in Debtor 1's	\$2,000.00		\$2,000.00	WVC § 38-10-4(e)
name, belongs to son) Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	
1976 Ford F350 Line from Schedule A/B: 3.4	\$1,200.00		\$1,200.00	WVC § 38-10-4(b)
Line nem somesale viz. Gi			100% of fair market value, up to any applicable statutory limit	
Miscellaneous household goods & furnishings (no single item valued at	\$500.00		\$250.00	WVC § 38-10-4(c)
more than \$400) including: Whirlpool Refrigerator - \$50; GE Microwave - \$15; Frigidaire Stove - \$25; Sectional - \$50; Table & 6 Chairs - \$100; Kitchen Cabinet - \$20; Book Shelf - \$20; Fu Line from Schedule A/B 6.1			100% of fair market value, up to any applicable statutory limit	
Samsung TV - \$50; 2 iPhones - \$200 Line from Schedule A/B 7.1	\$250.00		\$125.00	WVC § 38-10-4(c)
Line from Schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit	
.40 Caliber Glock Line from Schedule A/B: 10.1	\$400.00		\$200.00	WVC § 38-10-4(e)
			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$200.00		\$100.00	WVC § 38-10-4(c)
2.10.110.11.00.1100.410.712.			100% of fair market value, up to any applicable statutory limit	
Wedding Rings Line from Schedule A/B: 12.1	\$75.00		\$37.50	WVC § 38-10-4(d)
			100% of fair market value, up to any applicable statutory limit	
Black & White Dog - \$75; Brown & Black Cat - \$20; Grey & White Cat -	\$115.00		\$57.50	WVC § 38-10-4(e)
\$20 Line from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	
Carpentry Tools Line from Schedule A/B: 14.1	\$100.00		\$50.00	WVC § 38-10-4(c)
			100% of fair market value, up to any applicable statutory limit	
Checking Account - Bank of Mount Hope, 835 Main Street E, Oak Hill,	\$245.30		\$122.65	WVC § 38-10-4(e)
WV 25901 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Anticipated 2019 Federal Tax Refund	\$9,500.00	•	\$4,750.00	WVC § 38-10-4(e)
Line from Schedule A/B: 28.1				

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	Anticipated 2019 State Tax Refund Line from Schedule A/B 28.2	\$600.00	\$300.00	WVC § 38-10-4(e)	
	Line Irom Schedule AVB. 26.2		100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 No		filed on or after the date of adjustment.)		
	Yes. Did you acquire the property covered No Yes	d by the exemption within	1,215 days before you filed this case?		

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						_
Fil	I in this information to	dentify your case	:			
De	ebtor 1					1
_	First Na		Middle Name	L	_ast Name	
	ebtor 2 Melin ouse if, filing) First Na	da Cheryl Carr	Middle Name		_ast Name	
(
Ur	nited States Bankruptcy (OUTHERN DISTRICT OF ' IVISION	WES	T VIRGINIA, BECKLEY	
	nse number					☐ Check if this is an
`	,					amended filing
O	fficial Form 10	6C				-
			anti (Mau Cla	:	aa Evament	
<u> </u>	chedule C:	rne Prop	erty You Cla	IIII	as Exempt	4/19
oro out	perty you listed on <i>Sched</i>	ule A/B: Property (Official Form 106A/B) as yo	ur sou		oplying correct information. Using the s exempt. If more space is needed, fill s, write your name and case number (if
app app iun	ecific dollar amount as o blicable statutory limit. ds—may be unlimited i	exempt. Alternativ Some exemptions n dollar amount. I nt and the value o	ely, you may claim the fu —such as those for healt lowever, if you claim an e	II fair h aid exem	s, rights to receive certain benefits	g exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemptior
Pa	rt 1: Identify the Pro	perty You Claim a	s Exempt			
1	Which set of exemption	ns are vou claimi	ng? Check one only, even	if you	ur spouse is filing with you	
٠.		-		-		
	You are claiming state	e and federal nonb	ankruptcy exemptions. 11 l	J.S.C	:. § 522(b)(3)	
	☐ You are claiming fed	eral exemptions. 1	1 U.S.C. § 522(b)(2)			
2.	For any property you	list on Schedule A	$V\!B$ that you claim as exer	npt, f	ill in the information below.	
	Brief description of the p		Current value of the	Am	ount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B that lists the	nis property	portion you own	01		
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
De	ebtor 2 Exemptions					
	Miscellaneous hou				\$250.00	WVC § 38-10-4(c)
	furnishings (no sin more than \$400) in		l at		100% of fair market value, up to	
	Whirlpool Refriger				any applicable statutory limit	
	Microwave - \$15; F		-			
	\$25; Sectional - \$56 Chairs - \$100; Kitch		20.			
	Book Shelf - \$20; F		-0,			
	Line from Schedule A/E	£ 6.1				
	Samsung TV - \$50;	2 iPhones - ¢2	nn :			WVC § 38-10-4(c)
	Line from Schedule A/E		\$250.00		\$125.00	****
					100% of fair market value, up to any applicable statutory limit	
	.40 Caliber Glock		\$400.00	_	\$200.00	WVC § 38-10-4(e)
	Line from Schedule A/E	₹ 10.1		_	100% of fair market value, up to	
					any applicable statutory limit	

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Clothes Line from Schedule A/B 11.1	\$200.00		\$100.00	WVC § 38-10-4(c)
	Line from Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
	Wedding Rings Line from Schedule A/B 12.1	\$75.00		\$37.50	WVC § 38-10-4(d)
				100% of fair market value, up to any applicable statutory limit	
	Black & White Dog - \$75; Brown & Black Cat - \$20; Grey & White Cat -	\$115.00		\$57.50	WVC § 38-10-4(e)
	\$20 Line from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	
	Carpentry Tools Line from Schedule A/B 14.1	\$100.00		\$50.00	WVC § 38-10-4(c)
	Life from concease //2 1-4.1			100% of fair market value, up to any applicable statutory limit	
	Checking Account - Bank of Mount Hope, 835 Main Street E, Oak Hill,	\$245.30		\$122.65	WVC § 38-10-4(e)
	WV 25901 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Anticipated 2019 Federal Tax Refund	\$9,500.00		\$4,750.00	WVC § 38-10-4(e)
	2011			100% of fair market value, up to any applicable statutory limit	
	Anticipated 2019 State Tax Refund Line from Schedule A/B 28.2	\$600.00		\$300.00	WVC § 38-10-4(e)
	Elle Holli 66/1664/6 7/12 25/2			100% of fair market value, up to any applicable statutory limit	
	Monies withheld from Debtor's wages pursuant to garnishment	\$2,000.00	•	\$2,000.00	WVC § 38-10-4(e)
within 90 days of filing bankruptcy, constituting a preference Line from Schedule A/B 35.1				100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 ■ No □ Yes. Did you acquire the property covered	years after that for case	s filed	, ,	
□ No □ Yes					

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Fill in this information to iden		()1 / /		
Debtor 1 Darius Allen Ca	or Ir		-	
First Name	Middle Name Last Name		}	
Debtor 2 Melinda Cheryl	Carr			
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the	SOUTHERN DISTRICT OF WEST VIRGINIA DIVISION	A, BECKLEY		
Case number				
(if known)			☐ Check	if this is an
			ameno	ded filing
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secured	d by Property	У	12/15
needed, copy the Additional Page, fill it ou known). 1. Do any creditors have claims secured by	If two married people are filing together, both are equ t, number the entries, and attach it to this form. On th y your property? his form to the court with your other schedules. You	e top of any additional _l	pages, write your name	
Yes. Fill in all of the information b	elow.			
Part 1: List All Secured Claims				
	more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 City National Bank	Describe the property that secures the claim:	\$48,138.00	\$60,000.00	\$0.00
3601 Maccorkle Ave SE Charleston, WV 25304-1421	206 Pleasant View Rd, Fayetteville, WV 25840-6788 Home and property at SURF .72 / GATEWOOOD RD, Plateau District As of the date you file, the claim is: Check all that apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	 An agreement you made (such as mortgage or sector loan) 	ured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 2427			
Add the dollar value of your entries in Coll f this is the last page of your form, add the Write that number here:	lumn A on this page. Write that number here: ne dollar value totals from all pages.	\$48,138 \$48,138		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			[Document	Page 3	3 of 72		
Fill	in this infor	mation to identify you	r case:					
Debtor	1	Darius Allen Carr	.lr					
		First Name	Middle Na	ame	Last Name		 }	
Debtor		Melinda Cheryl C						
(Spouse	if, filing)	First Name	Middle Na	ime	Last Name			
United	States Bank	kruptcy Court for the:	SOUTHERN DIVISION	DISTRICT OF	WEST VIRGINI	A, BECKLEY		
Case n	number							
(if known)			_				heck if this is an
							a	mended filing
Offici	al Form	106F/F						
		F: Creditors W	ho Have	Unsecure	d Claime			12/15
						Part 2 for croditor	s with NONPRIORITY clain	
Schedul D: Credi the Cont	e G: Executo tors Who Ha	ry Contracts and Unexpi ve Claims Secured by Pr je to this page. If you hav	red Leases (Off operty. If more	icial Form 106G). space is needed,	Do not include a copy the Part yo	any creditors with u need, fill it out,	edule A/B: Property (Officiant partially secured claims to the number the entries in the portion of any additional pages,	hat are listed in Schedule boxes on the left. Attach
Part 1:	List All	of Your PRIORITY Un	secured Claim	ıs				
1. Do	any creditors	s have priority unsecured	d claims agains	t you?				
	No. Go to Par	rt 2.						
	Yes.							
Part 2:	List All	of Your NONPRIORIT	/ Unsecured (laime				
		s have nonpriority unsec						
_	-		_	•	ماده بردی داد	dulaa		
		nothing to report in this pa	art. Submit this to	orm to the court wit	in your other sche	dules.		
	Yes.							
uns	ecured claim,	list the creditor separately	for each claim.	For each claim liste	ed, identify what t	ype of claim it is. D	If a creditor has more than not list claims already incl insecured claims fill out the 0	uded in Part 1. If more
								Total claim
4.1	Ally Fina	ncial		Last 4 digits of a	ccount number	10T1		\$8,702.00
		Creditor's Name	_	_			<u> </u>	
	500 Waa	dward Ave		When was the de	ebt incurred?			-
		MI 48226-3416						
		eet City State Zip Code		As of the date yo	u file, the claim i	is: Check all that a	apply	
		ed the debt? Check one.						
	Debtor 1	-		☐ Contingent				
	Debtor 2	only		☐ Unliquidated				
	Debtor 1	and Debtor 2 only		☐ Disputed				
	☐ At least of	one of the debtors and and	ther	Type of NONPRIC	ORITY unsecured	d claim:		
		this claim is for a comm	nunity	☐ Student loans				
	debt	subject to offset?		Obligations ari	•	ration agreement	or divorce that you did not	
	No	. Sabject to dilecti		Debts to pensi		a plans, and other	similar debts	
	☐ Yes			_		amount owe		
	– 162			Other. Specify	Denoiency	amount owe	a on veniole	

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Debto Debto		•	
4.2	ARH Beckley Hospital	Last 4 digits of account number 9477	\$200.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	306 Stanaford Rd Beckley, WV 25801-3142		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	_	
	_	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		· · · · · · · · · · · · · · · · · · ·	
	Yes	Other. Specify Medical services	
4.3	AT&T	Last 4 digits of account number 4601	\$3,480.21
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 536216	when was the debt incurred?	
	Atlanta, GA 30353-6216		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Cell phone services	
4.4	Auto Credie Now LLC	Last 4 digits of account number 3020	\$6,705.00
	Nonpriority Creditor's Name		ψο,,, οσ.σσ
		When was the debt incurred?	
	4631 Robert C Byrd Dr		
	Beckley, WV 25801-8180 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	and the second and th	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	— Debior Fand Debior 2 Only	■ Disputed	

Official Form 106 E/F

debt

■ No ☐ Yes Type of NONPRIORITY unsecured claim:

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Deficiency amount owed for vehicle

☐ Disputed

☐ Student loans

☐ At least one of the debtors and another

Is the claim subject to offset?

 \square Check if this claim is for a community

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4.5	C&F Finance Company	Last 4 digits of account number nown	\$15,054.29
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 2129		
	Richmond, VA 23218-2129		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify	
4.6	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number 6613	\$969.57
		When was the debt incurred?	
	PO Box 6492		
	Carol Stream, IL 60197-6492 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	ne or and date year may and oranne or	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Revolving credit card charges	
4.7	Cassis Dental Center PLLC	Last 4 digits of account number 3100	\$878.62
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 926		
	Fayetteville, WV 25840-0926	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other Specify Dental services	
	— 163	Other. Specify	

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Document Page 36 of 72 Debtor 1 Debtor 2 Carr, Darius Allen Jr. & Carr, Melinda Cheryl Case number (if known) 4.8 Last 4 digits of account number \$4,015.06 Citibank Nonpriority Creditor's Name When was the debt incurred? PO Box 9001037 Louisville, KY 40290-1037 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Revolving credit card charges for Acct # 6011 5750 3120 8619 - \$891.19 & Acct # ☐ Yes Other. Specify 5424 1807 9425 2822 - \$3,123.87 4.9 **Cleveland Clinic** Last 4 digits of account number 0002 \$250.00 Nonpriority Creditor's Name When was the debt incurred? 18901 Lake Shore Blvd Euclid. OH 44119-1078 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical services ☐ Yes 4.10 **CNAC** Last 4 digits of account number 8833 \$7,263.02 Nonpriority Creditor's Name ATTN: WV108 When was the debt incurred? 4631 Robert C Byrd Dr Beckley, WV 25801 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Deficiency amount owed for a 2006

☐ Yes

Chevrolet Trailblazer

Other. Specify (IGNDT13S662143650)

Debtor	Case 2:20-bk-20051 Doc 1	Document Page 37 of 72	c Main
Debtor		nda Cheryl Case number (f known)	
4.11	Collegiate Housing Services Nonpriority Creditor's Name	Last 4 digits of account number 3755	\$5,755.87
	Nonpriority Creditor's Name	When was the debt incurred?	
	5175 E 65th St		
	Indianapolis, IN 46220-4816	- A (1) 1 () () () () () () () () (
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Apartment rental	
	165	Other. Specify Apartment Tental	
4.12	Credit One Bank	Last 4 digits of account number	\$1,140.52
	Nonpriority Creditor's Name		ψ1,140.02
		When was the debt incurred?	
	PO Box 60500 City of Industry, CA 91716-0500		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		Revolving credit card charges for Acct #	
	Yes	■ Other. Specify 4447 9623 4618 8547 - \$841.76 and Acct # 4447 9624 8195 4398 - \$298.76	
		1111 00210100 1000 1200110	
4.13	DIRECTV	Last 4 digits of account number 9413	\$753.99
	Nonpriority Creditor's Name		•
	PO Box 105261	When was the debt incurred?	
	Atlanta, GA 30348-5261		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	

■ No

☐ Yes

■ Other. Specify Satellite services

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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PO Box 105760 Atlanta, GA 30348-5760						
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
Yes	■ Other. Specify Medical services					

When was the debt incurred?

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Lowe's/Synchrony Bank	Last 4 digits of account number 2731	\$1,199.2
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 530914 Atlanta, GA 30353-0914		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Revolving credit card charges	
Mark S. Younis, MD	Last 4 digits of account numbernown	\$63.0
Nonpriority Creditor's Name	When was the debt incurred?	
122 Pinnell St Ripley, WV 25271-9101	mon was the dest medical.	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical services	
New River Health Association	Last 4 digits of account number 8129	\$79.4
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 337 Scarbro, WV 25917		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other Specific Medical services	

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Debto Debto		<u> </u>	
4.20	Oak Hill Emergency Physicians	Last 4 digits of account number 7027	\$130.38
	Nonpriority Creditor's Name	When was the debt incurred?	
	300 S Park Rd Ste 400	 -	
	Hollywood, FL 33021-8353	- A control to the first to the first of	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical services	
4.21	OneMain Financial Inc. Nonpriority Creditor's Name	Last 4 digits of account number 6759	\$6,077.00
		When was the debt incurred?	
	601 NW 2nd St Evansville, IN 47708-1013	_	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
	<u> </u>	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Personal loan	
4.22	Orthopaedic & Spine Surgery Assoc.	Last 4 digits of account number E003	\$153.08
	Nonpriority Creditor's Name	When was the debt incurred?	
	215 Brookshire Ln Beckley, WV 25801-6729	when was the dept incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	

■ No

☐ Yes

Other. Specify Medical services

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Plateau Medical Center	Last 4 digits of account number	\$2,66
Nonpriority Creditor's Name	When was the debt incurred?	
430 Main St	When was the debt incurred:	
Oak Hill, WV 25901-3484		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical services for Acct # 8411751-1756 - \$821.04 and Acct # Unknown - \$1,844.36	
Professional Anesthesia Services	Last 4 digits of account number 7901	\$73
Nonpriority Creditor's Name	Last 4 digits of account number	***
	When was the debt incurred?	
PO Box 1506		
Charleston, WV 25325-1506 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical services	
Progressive Leasin	Last 4 digits of account number 4735	\$79
Nonpriority Creditor's Name	When was the debt incurred?	
256 W Data Dr		
Draper, UT 84020-2315	·	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Revolving credit card charges	

Case 2:20-bk-20051 Doc Debtor 1 Debtor 2 Carr, Darius Allen Jr. & Carr, Mel	Document Page 42 of 72	c Main					
Receivables Performance 4.26 Management LLC	Last 4 digits of account number 67XX	\$753.00					
Nonpriority Creditor's Name	When was the debt incurred?						
PO Box 1548 Lynnwood, WA 98046-1548							
Number Street City State Zip Code Who incurred the debt? Check one.	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unknown Last 4 digits of account number 9101 \$1,045 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed						
Debtor 1 only	П						
<u> </u>							
■ Debtor 2 only							
Debtor 1 and Debtor 2 only	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not						
■ No							
■ No							
4.27 Suddenlink Nonpriority Creditor's Name PO Box 742535 Cincilination Classification (Classification)		\$1,049.99					
Cincinnati, OH 45274-2535 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
☐ Debtor 1 only	☐ Contingent						
Debtor 2 only	-						
☐ Debtor 1 and Debtor 2 only							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	•					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts						
Yes	■ Other. Specify Cable and internet services						
4.28 Synchrony Bank/Tire Pros Nonpriority Creditor's Name	Last 4 digits of account number 2353	\$720.12					
Monphority Orealion's Name	When was the debt incurred?						
PO Box 960061 Orlando, FL 32896-0061 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						

■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed lacksquare At least one of the debtors and another

 \square Check if this claim is for a community

debt

Is the claim subject to offset?

■ No ☐ Yes Type of NONPRIORITY unsecured claim:

☐ Student loans

 \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Revolving credit card charges

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Case number (if known)	
Last 4 digits of account number 4025	
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
\square Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify Medical services	
Last 4 digits of account number 0001	\$1
	Ψι
When was the debt incurred?	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
_ ·	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
\square Obligations arising out of a separation agreement or divorce that you did not	
report as priority claims	
Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify Cell phone services	
Last 4 digits of account number 3423	\$
<u> </u>	
When was the debt incurred?	
	Last 4 digits of account number 4025 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical services Last 4 digits of account number O001 When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cell phone services

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

☐ Debtor 1 and Debtor 2 only

lacksquare At least one of the debtors and another

 \square Check if this claim is for a community

debt

Is the claim subject to offset?

■ No ☐ Yes

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Revolving credit card charges

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Debto Debto		•	Case number (f known)				
4.32	WebBank/Fingerhut	Last 4 digits of account numb	per	\$623.00			
	Nonpriority Creditor's Name	When was the debt incurred?	,				
	PO Box 0260						
	Saint Cloud, MN 56395-0260						
	Number Street City State Zip Code	As of the date you file, the cla	aim is: Check all that apply				
	Who incurred the debt? Check one.	_					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a report as priority claims	separation agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sh	naring plans, and other similar debts				
	□Yes		ng credit card charges for Acct # vn - \$286.00 & Acct # 636992XXX -				
4.33	William A. Klenk, DDS Nonpriority Creditor's Name	Last 4 digits of account numb	per <u>5882</u>	\$284.00			
	Nonphonty Creditor's Name	When was the debt incurred?					
	PO Box 497 Hico, WV 25854-0497						
	Number Street City State Zip Code	As of the date you file, the cla	aim is: Check all that apply				
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt		separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No		naring plans, and other similar debts				
	Yes	Other. Specify Dental s	services				
Part 3	List Others to Be Notified About a De	ebt That You Already Listed					
5. Use t is try have notif	this page only if you have others to be notified ying to collect from you for a debt you owe to s more than one creditor for any of the debts the ied for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt th someone else, list the original credito nat you listed in Parts 1 or 2, list the a or submit this page.	at you already listed in Parts 1 or 2. For example, or in Parts 1 or 2, then list the collection agency hedditional creditors here. If you do not have addition	ere. Similarly, if you			
	and Address ty Recovery Services LLC	On which entry in Part 1 or Part 2 did Line 4.20 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims				
	ox 4262	Line 4.20 of (Check one).	,				
_	nton, PA 18505-6262		■ Part 2: Creditors with Nonpriority Unsecured Cl	aims			
		Last 4 digits of account number	7027				
AMC PO B	ox 1235	On which entry in Part 1 or Part 2 did Line 4.15 of (Check one):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Cl.				
∟ıms	ford, NY 10523-0935	Last 4 digits of account number					
Ashv PO B	and Address vood Financial sox 47707	On which entry in Part 1 or Part 2 did Line 4.11 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Cl.				
India	napolis, IN 46247-0707	Last 4 digits of account number	• •	-			
		-	3755				
Name a	and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?				

Name and Address
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Debtor 1 Debtor 2 Carr, Darius Allen Jr. & Carr, N	Melinda Cheryl	Case number (f known)	
Atkins & Ogle Law Offices LLC PO Box 300	Line 4.5 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Buffalo, WV 25033-0300	Last A distant as account when		
	Last 4 digits of account number	nown	
Name and Address Avante USA	On which entry in Part 1 or Part 2 di Line 4.9 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims	
3600 S Gessner Rd Ste 225	Line 4.3 or (Check one).	Part 2: Creditors with Nonpriority Unsecured Claims	
Houston, TX 77063-5357	Last 4 digits of account number	0002	
	0 1:1		
Name and Address Cavalry Portfolio Services	On which entry in Part 1 or Part 2 di Line 4.8 of (Check one):	id you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 27288		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Tempe, AZ 85285-7288	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?	
Circuit Court of Fayette County, WV	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
100 N Court St Fayetteville, WV 25840-1200		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	nown	
Name and Address	On which entry in Part 1 or Part 2 di		
Credence Resource Management LLC	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
PO Box 2390		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Southgate, MI 48195-4390	Last 4 digits of account number	4601	
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?	
Credit Bureau Systems Inc.	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 11788 Lexington, KY 40578-1788		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	9477	
Name and Address	On which entry in Part 1 or Part 2 di	- · <u>-</u>	
Credit Collection Services PO Box 55126	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Boston, MA 02205-5126	Look 4 digito of account number	Part 2: Creditors with Nonphority Onsecured Claims	
	Last 4 digits of account number		
Name and Address Credit Collections USA	On which entry in Part 1 or Part 2 di Line 4.24 of (<i>Check one</i>):	id you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
16 Distributor Dr Ste 1	(ssss).	■ Part 2: Creditors with Nonpriority Unsecured Claims	
Morgantown, WV 26501-7209	Last 4 digits of account number	7901	
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?	
Credit Control LLC	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 100 Hazelwood, MO 63042-0100		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	· <u> </u>	
Credit One Bank PO Box 98878	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Las Vegas, NV 89193-8878	Last 4 digits of account number	— r an z. Greditors with induptionity diffsecured claims	
Name and Address	On which entry in Part 1 or Part 2 di	id you liet the original creditor?	
Diversified Consultants Inc	Line 4.30 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 551268		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Jacksonville, FL 32255-1268	Last 4 digits of account number	0001	
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?	

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Debtor 1 Debtor 2 Carr, Darius Allen Jr. & Carr,	•	Case number (f known)	
EOS CC PO Box 981025	Line <u>4.30</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Boston, MA 02298-1025	Last 4 digits of account number		
		0001	
Name and Address FBCS	On which entry in Part 1 or Part 2 di Line 4.8 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
330 S Warminster Rd Ste 353	<u></u> 6. (6./66/.6./6.).	Part 2: Creditors with Nonpriority Unsecured Claims	
Hatboro, PA 19040-3433	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
Fred A. Jesser, Esquire	Line 4.14 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 450 Fayetteville, WV 25840-0450		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	6635	
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
Frontline Asset Strategies, LLC 2700 Snelling Ave N Ste 250	Line 4.12 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Roseville, MN 55113-1783		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address I.C. System, Inc.	On which entry in Part 1 or Part 2 di Line 4.33 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 64378	Line 4.33 of (Check one).	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Saint Paul, MN 55164-0378	Last 4 digits of account number	5882	
Name and Address			
Name and Address JH Portfolio Debt Equities LLC	On which entry in Part 1 or Part 2 di Line 4.8 of (<i>Check one</i>):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
5757 Phantom Dr Ste 225		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Hazelwood, MO 63042-2429	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
LVNV Funding LLC PO Box 10497	Line 4.12 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Greenville, SC 29603-0497		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Martin & Seibert	On which entry in Part 1 or Part 2 di Line 4.23 of (Check one):	d you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 1085	Line 4.23 of (Check one).	Part 2: Creditors with Nonpriority Unsecured Claims	
Martinsburg, WV 25402-1085	Last 4 digits of account number	, art 2. Ground's marries, proving Ground's Grand	
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
Midland Credit Management, Inc.	Line 4.28 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 51319 Los Angeles, CA 90051-5619		■ Part 2: Creditors with Nonpriority Unsecured Claims	
LUS Aligeles, CA 90031-3019	Last 4 digits of account number	2353	
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
Midland Credit Management, Inc.	Line <u>4.28</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
PO Box 60578 Los Angeles, CA 90060-0578		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	2353	
Name and Address	On which entry in Part 1 or Part 2 di	· <u> </u>	
Midland Credit Management, Inc. PO Box 60578	Line <u>4.31</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Los Angeles, CA 90060-0578	Last 4 digits of account number		
	Last 4 digits of account number	3423	
Name and Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	

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Debtor 1 Debtor 2 C	arr, Darius Allen Jr. & Carr, I		Case nu	umber (if kno	own)
	redit Management, Inc.	Line 4.17 of (Check one):	☐ Part 1: (Creditors wit	h Priority Unsecured Claims
PO Box 60	9578 es, CA 90060-0578		Part 2: 0	Creditors wit	h Nonpriority Unsecured Claims
LUS Aligei	es, CA 90000-0376	Last 4 digits of account number	27	731	
Name and Ad		On which entry in Part 1 or Part 2 did			
Midland C PO Box 51	redit Management, Inc.	Line 4.17 of (<i>Check one</i>):			h Priority Unsecured Claims
	es, CA 90051-5619		■ Part 2: 0	Oreditors wit	h Nonpriority Unsecured Claims
		Last 4 digits of account number	27	731	
Name and Ad		On which entry in Part 1 or Part 2 did		-	
1714 Holli	Capital Partners LLC	Line 4.20 of (<i>Check one</i>):			h Priority Unsecured Claims h Nonpriority Unsecured Claims
	a, VA 22307-1926	1 4 -diit f			n Nonpriority Unsecured Claims
		Last 4 digits of account number		027	
Name and Ade	dress inancial Services LLC	On which entry in Part 1 or Part 2 did Line 4.20 of (<i>Check one</i>):		•	or? h Priority Unsecured Claims
PO Box 36		ellic 4120 of Concok one).			h Nonpriority Unsecured Claims
Indianapo	lis, IN 46236-1450	Last 4 digits of account number		027	
Name and Ad	dran	On which entry in Part 1 or Part 2 did			
Name and Add Portfolio F	Recovery Associates, LLC	Line 4.6 of (Check one):	,	0	งเ <i>ร</i> h Priority Unsecured Claims
PO Box 12	2914		Part 2: (Creditors wit	h Nonpriority Unsecured Claims
Nortolk, V	A 23541-0914	Last 4 digits of account number	66	613	
Name and Address Professional Account Services PO Box 188 Brentwood, TN 37024-0188		On which entry in Part 1 or Part 2 did Line 4.23 of (<i>Check one</i>): Last 4 digits of account number	☐ Part 1: 0	Creditors wit	or? h Priority Unsecured Claims h Nonpriority Unsecured Claims
Name and Ade	dress	On which entry in Part 1 or Part 2 did	vou list the or	riginal credit	or?
Receivable	es Performance	Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Claims		
Manageme PO Box 15			Part 2: 0	Creditors wit	h Nonpriority Unsecured Claims
	I, WA 98046-1548	Last 4 digits of account number	9/	413	
Name and Add	redit Services, Inc.	On which entry in Part 1 or Part 2 did Line 4.27 of (<i>Check one</i>):	· —	•	or? h Priority Unsecured Claims
PO Box 91	00	• (••)			h Nonpriority Unsecured Claims
Farmingda	ale, NY 11735-9100	Last 4 digits of account number	9101		
	dd the Amounts for Each Type of		cal reporting	nurnoses o	nly. 28 U.S.C. §159. Add the amounts for each
	ecured claim.		ran reperansy (p p . 0000 0	,
	6a. Domestic support obligat	ions	6a.	¢	Total Claim
Total claims	oa. Domesiio support obligat		ua.	\$	0.00
from Part 1		ebts you owe the government	6b.	\$	0.00
	· · · · · · · · · · · · · · · · · · ·	nal injury while you were intoxicated unsecured claims. Write that amount her	6c. re. 6d.	\$ \$	0.00 0.00
	The state of the s			Ť ——	

				Total Ciallii
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
	- 3	you did not report as priority claims	6g.	\$ 0.00

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Debtor 1
Debtor 2
Carr, Darius Allen Jr. & Carr, Melinda Cheryl

Case number (if known)

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ 73,647.35

Official Form 106 E/F

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		<u> Docume</u>	<u> 111 - Pade 49 01 7</u>	/
Fill in th	is information to identif	y your case:		
Debtor 1	Darius Allen Cari	r, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Melinda Cheryl C	arr		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT DIVISION	OF WEST VIRGINIA, BECK	KLEY
Case number _				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number,	whom you have the Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			
	Number	Olleet			
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			<u> </u>
	Number	Sileei			
	City		State	ZIP Code	_
2.4	Oity		Otato	211 0000	
	Name				_
					_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5	City		Otate	Zii Gode	
2.0	Name				_
	1401110				
					<u> </u>
	Number	Street			
	O:t-		04-4-	7ID 0 - 4 -	<u> </u>
	City		State	ZIP Code	

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		Documer	nt Page 50 of	72	
Fi	II in this information to identi	fy your case:			
Debtor 1	Darius Allen Car	,			
Debtor 2	First Name Melinda Cheryl C	Middle Name	Last Name		
(Spouse if, fili		Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	SOUTHERN DISTRICT O	OF WEST VIRGINIA, BI	ECKLEY	
Case num	ber				
(if known)					☐ Check if this is an amended filing
	l Form 106H Iule H: Your Cod	ebtors			12/15
are filing to and numbe	ogether, both are equally resp	oonsible for supplying corr the left. Attach the Additio	ect information. If mo	re space is needed, cop	as possible. If two married people y the Additional Page, fill it out, ional Pages, write your name and
1. Do	you have any codebtors? (If	you are filing a joint case, do	not list either spouse as	a codebtor.	
■ No					
☐ Yes	3				
	hin the last 8 years, have you rnia, Idaho, Louisiana, Nevada,				ates and territories include Arizona,
	Go to line 3. Did your spouse, former spou	oo or logal aguivalent livo wit	h you at the time?		
□ 165	s. Dia your spouse, ronner spou	se, or legal equivalent live wit	ir you at the time!		
line 2	again as a codebtor only if the Schedule E/F (Official Form	at person is a guarantor o	r cosigner. Make sure	you have listed the cree	th you. List the person shown in ditor on Schedule D (Official Forn E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IIP Code		Column 2: The credi	tor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin	e
				☐ Schedule G, line	
-	Number Street City	State	ZIP Code	-	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin	e
				☐ Schedule G, line	
-	Number Street	State	ZIP Code	-	
	City	State	ZIF COUE		

	in this information to identify your ca									
Deb	otor 1 Darius Allen	Carr, Jr.			_					
	otor 2 Melinda Che	ryl Carr			_					
Uni	ted States Bankruptcy Court for the:	SOUTHERN DISTRIC BECKLEY DIVISION	T OF WEST VIR	GINIA,	_					
(If kn	se number own)						nded emen	t showing	g postpetition ving date:	chapter 13
<u>O</u> 1	fficial Form 106I					MM / D	D/ YY	ΥΥ		
S	chedule I: Your Inco	ome								12/15
spoi	blying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O t1: Describe Employment	spouse is not filing with	you, do not inc	lude informa	ation	about your s	oouse	e. If more	e space is n	eded,
١.	information.		Debtor 1		Debt	Debtor 2 or non-filing spouse				
	If you have more than one job,	Employment status	☐ Employed	d		■ E	■ Employed			
	attach a separate page with information about additional employers.		■ Not employed				☐ Not employed General Manager			
	Include part-time, seasonal, or	Occupation				Gen	erai	wanage	er	
	self-employed work.	Employer's name				Wer	dy's	i		
	Occupation may include student or homemaker, if it applies.	Employer's address						n Cente	er Rd / 25840-95	39
		How long employed th	ere?				21	years		
Par	Give Details About Mon	thly Income								
	mate monthly income as of the dar ss you are separated.	te you file this form. If yo	ou have nothing to	report for any	y line	, write \$0 in the	spac	e. Include	e your non-fil	ng spouse
	u or your non-filing spouse have more e, attach a separate sheet to this forr		ine the informatio	n for all emplo	oyers	for that persor	on th	ne lines be	elow. If you n	eed more
						For Debtor 1			btor 2 or ing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca	,	, ,	2.	\$	0.0	0	\$	3,269.12	_
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.0	00	+\$	0.00	_
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	0.00		\$	3,269.12	

Official Form 106l Schedule I: Your Income page 1

	tor 2	Carr, Darius Allen Jr. & Carr, Melinda Cheryl		Case r	number (if known)			
	Copy	/ line 4 here	4.	For I	Debtor 1 0.00	For Debt	or 2 or g spouse 3,269.12	
5	Liet	all payroll deductions:		· —				
5.		• •	5 -	œ.	0.00	c	747.04	
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ \$	0.00	\$ \$	717.31	
	5b.	Mandatory contributions for retirement plans	5b.	\$ 	0.00		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	* *	0.00	\$	0.00	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$ 	0.00	\$	0.00	
	5f.	Domestic support obligations	5e. 5f.	\$ 	0.00	\$	0.00	
	5g.	Union dues	5g.	^ψ _	0.00	\$	0.00	
	5g. 5h.	Other deductions. Specify:	5g. 5h.+	· —		۰\$	0.00	
^				· -		-		
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	717.31	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	2,551.81	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$		+ \$	0.00	
_			_ _ [1
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10	Cala	ulete monthly income. Add line 7 , line 0	10 6		0.00	0.554.6		0.554.04
10.		ulate monthly income. Add line 7 + line 9.	10. \\$		0.00 + \$_	2,551.8	[1] = \$	2,551.81
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	, L					
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your difriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not avify:	lependen			Schedule J.	1. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain					2. \$2	2,551.81 ed
40	D		•				monthly	
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	1					
	_	Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

E-11-		· · · · · · · · · · · · · · · · · · ·						
Fill	in this informa	ation to identify yo	ur case:					
Deb	otor 1	Darius Allen	Carr, Jr	•		_	eck if this is:	
Deb	otor 2	Melinda Che	rvi Carr				An amended filing A supplement show	ving postpetition chapter 13
(Sp	ouse, if filing)	Monnaa One	iyi can			_	expenses as of the	
Unit	ted States Bank	ruptcy Court for the:		IERN DISTRICT OF WESTEY DIVISION	Γ VIRGINIA,		MM / DD / YYYY	
1	se number nown)							
0	fficial Fo	orm 106J						
S	chedule	J: Your I	Expen	ses				12/1
info (if k	ormation. If m known). Answ	ore space is need wer every question	eded, attac on.	If two married people are ch another sheet to this fo				supplying correct ur name and case numbe
Par 1.	t 1: Desci	ribe Your House nt case?	hold					
	☐ No. Go to							
	Yes. Doe	es Debtor 2 live i	n a separa	te household?				
	■ N		st file Offici	al Form 106J-2, <i>Expenses t</i>	for Separate Househo	oldof Debt	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Grandson		5	Yes
								□ No □ Yes
					-			□ Yes
								☐ Yes
								□No
^	Da							☐ Yes
3.	expenses o	penses include f people other th d your depende	nan $_{\square}$	No Yes				
exp	imate your ex		our bankru	y Expenses ptcy filing date unless yo r is filed. If this is a supple				
val		sistance and ha		overnment assistance if yed it on Schedule I: Your I			Your exp	penses
4.		or home ownersl and any rent for the		ses for your residence. Indict.	clude first mortgage	4.	\$	346.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	25.47
		erty, homeowner's	, or renter's	insurance		4a. 4b.	· ———	80.00
	•	e maintenance, re				4c.	·	0.00
		eowner's associati				4d.	·	0.00
5.	Additional r	mortgage payme	nts for vo	ur residence, such as hom	ne equity loans	5.	\$	0.00

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Debtor 1 Debtor 2	Carr, Darius Allen Jr. & Carr, Melinda Cheryl	Case number (if known)	
6. Utili	ties:		
6a.	Electricity, heat, natural gas	6a. \$	325.00
6b.	Water, sewer, garbage collection	6b. \$	125.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	217.77
6d.	Other. Specify: Garbage Fee	6d. \$	18.00
. Foo	d and housekeeping supplies	7. \$	750.00
. Chil	dcare and children's education costs	8. \$	0.00
. Clot	hing, laundry, and dry cleaning	9. \$	50.00
o. Pers	sonal care products and services	10. \$	50.00
1. Med	lical and dental expenses	11. \$	50.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12. \$	250.00
3. Ent e	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	50.00
I. Cha	ritable contributions and religious donations	14. \$	0.00
5. Ins u			
	not include insurance deducted from your pay or included in lines 4 or 20.	15a. \$	0.00
	Life insurance	· <u> </u>	0.00
	Health insurance	·	0.00
	Vehicle insurance	15c. \$	179.00
	Other insurance. Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20.	15d. \$	0.00
Spe	cify: Personal Property Taxes	16. \$	12.50
	allment or lease payments: Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	
	r payments of alimony, maintenance, and support that you did not repor		0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 10		0.00
	er payments you make to support others who do not live with you.	\$	0.00
Spe	cify:	19.	_
	er real property expenses not included in lines 4 or 5 of this form or on ${\sf S}$		
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
20c.	Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e.	Homeowner's association or condominium dues	20e. \$	0.00
. Oth	er: Specify:	21. +\$	0.00
2. Calc	culate your monthly expenses		
22a.	Add lines 4 through 21.	\$	2,528.74
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2 \$	
22c.	Add line 22a and 22b. The result is your monthly expenses.	\$	2,528.74
3. Calc	culate your monthly net income.		
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,551.81
	Copy your monthly expenses from line 22c above.	23b\$	2,528.74
_00.	Capy year. Morning expended from mile 220 above.	200. ψ	2,320.14
23c.	Subtract your monthly expenses from your monthly income.		
	The result is your monthly net income.	23c. \$	23.07
For e modi	you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect fication to the terms of your mortgage?		e or decrease because of a
Пγ	es Explain here:		

■ No.	
☐ Yes.	Explain here:

Fill in this in	nformation to identify y	our case:		
Debtor 1	Darius Allen Car	r. Jr.		
	First Name	Middle Name	Last Name)
Debtor 2	Melinda Cheryl C	Carr		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT O	DF WEST VIRGINIA, BECKLEY	
Case number				
(if known)				☐ Check if this is an amended filing
If two married pe You must file this obtaining money	eople are filing together s form whenever you fi	, both are equally responsi le bankruptcy schedules on n connection with a bankru	Debtor's Schedules ible for supplying correct information. r amended schedules. Making a false sta ptcy case can result in fines up to \$250,	atement, concealing property, or
Sign	n Below			
Did you pa	y or agree to pay some	one who is NOT an attorne	y to help you fill out bankruptcy forms?	
■ No				
☐ Yes. N	Name of person			Bankruptcy Petition Preparer's Notice, ttion, and Signature (Official Form 119)
	lity of perjury, I declare e true and correct.	that I have read the summa	ary and schedules filed with this declara	tion and
X /s/ Dar	rius Allen Carr, Jr.		X /s/ Melinda Cheryl Carr	
	s Allen Carr, Jr.		Melinda Cheryl Carr	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date I	February 6, 2020		Date February 6, 2020	

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			<u> </u>				
Fill in th	is information to identi	fy your case:					
Debtor 1	Darius Allen Carr, Jr.						
	First Name	Middle Name	Last Name				
Debtor 2	Melinda Cheryl C	arr					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		SOUTHERN DISTRICT DIVISION	OF WEST VIRGINIA, BECKLEY				
Case number _							

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	11: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	60,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	19,685.30
	1c. Copy line 63, Total of all property on Schedule A/B	\$	79,685.30
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	48,138.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	73,647.35
	Your total liabilities	\$	121,785.35
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	2,551.81
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,528.74
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your ot	her schedı	ules.
7	Yes What kind of daht do you have?		

- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.

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Debtor 1	Document	Page 57 of 72
Debtor 2	Carr, Darius Allen Jr. & Carr, Melinda Cheryl	Case number (if known)

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 3,275.00

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	Fill in this	information to identi	fv vour case:			
Deh	otor 1	Darius Allen Ca				
DCD	ntor r	First Name	Middle Name	Last Name		
	otor 2	Melinda Cheryl				
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT O	OF WEST VIRGINIA, BECKL	ΞΥ 	
Cas (if kn	e number own)				-	heck if this is an mended filing
Sta Be a infor	s complete a	of Financial		e filing together, both are ed	ankruptcy qually responsible for supply additional pages, write your r	
Par	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	s?			
	■ Married □ Not mar	ried				
2.	During the la	st 3 years, have you	lived anywhere other than w	here you live now?		
	■ No □ Yes. List	all of the places you liv	red in the last 3 years. Do not i	nclude where you live now.		
	Debtor 1 Pri	or Address:	Dates Debtor 1 I	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					y property state or territory? o, Texas, Washington and Wis	
	■ No					
		ke sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Offic	cial Form 106H).		
Par	Explain	n the Sources of You	Income			
	Fill in the tota	I amount of income you	ployment or from operating a received from all jobs and a ave income that you receive to	Il businesses, including part-t		ar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last calendar nuary 1 to De	year: cember 31, 2019)	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$37,191.13
			☐ Operating a business		☐ Operating a business	

Case 2:20-bk-20051 Doc 1 Filed 02/07/20 Entered 02/07/20 13:44:38 Desc Main Page 59 of 72 Document Debtor 1 Carr, Darius Allen Jr. & Carr, Melinda Cheryl Case number (if known) Debtor 2 Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions Check all that apply. exclusions) and exclusions) For the calendar year before that: \$0.00 \$30,066.00 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year: \$4,813.00 \$24,521.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? П Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. ☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7.

> Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for

this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
City National Bank 3601 Maccorkle Ave SE Charleston, WV 25304-1421	November 2019, December 2019, January 2020	\$1,038.00	\$48,138.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other

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	btor 1 btor 2 Carr, Darius Allen Jr. & Carr, Me		Cas	se number (if knot	wn)	
7.	Within 1 year before you filed for bankruptcy Insiders include your relatives; any general partny which you are an officer, director, person in contusiness you operate as a sole proprietor. 11 U.S.	ers; relatives of any genera rol, or owner of 20% or mor	l partners; partnershi e of their voting secu	ps of which you irities; and any r	are a general part nanaging agent, in	ner; corporations of acluding one for a
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		this payment
8.	Within 1 year before you filed for bankruptcy insider? Include payments on debts guaranteed or cosign No		nents or transfer ar	ny property on	account of a dek	ot that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yo still ow		this payment litor's name
Pa	rt 4: Identify Legal Actions, Repossessions	s, and Foreclosures				
9.	Within 1 year before you filed for bankruptcy List all such matters, including personal injury ca and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankruptcy Check all that apply and fill in the details below No. Go to line 11.		rty repossessed, fo	reclosed, garn	ished, attached,	seized, or levied?
	Yes. Fill in the information below.			_		
	Creditor Name and Address	Describe the Property		Da	ate	Value of the property
	C&F Finance Company PO Box 2129 Richmond, VA 23218-2129	Explain what happened 2015 Hyundai Elantr 2016). Debtor 2's wa garnished for deficie	ra (repossessed i ages have been			\$10,000.00
		■ Property was reposses	ssed.			
		Property was foreclose				
		Property was garnished				
		☐ Property was attached	I, seized or levied.			
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment becau No Yes. Fill in the details.		uding a bank or fina	ancial institutio	on, set off any am	nounts from your
	Creditor Name and Address	Describe the action the	creditor took		ate action was ken	Amount
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or and □ No □ Yes		rty in the possessic	on of an assign	ee for the benefi	t of creditors, a

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		Document Pag	e 61 of 72		
	otor 1 otor 2 Carr, Darius Allen Jr. & Carr, M	elinda Cheryl	Case number (if k	nown)	
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gifts with	a total value of more than	\$600 per person?	
	Yes. Fill in the details for each gift.	nov Dopoviho the mifts		Detec you gove	Value
	Gifts with a total value of more than \$600 person	per Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup ■ No Yes. Fill in the details for each gift or cont		ontributions with a total va	llue of more than \$6	00 to any charity?
	Yes. Fill in the details for each gift or cont Gifts or contributions to charities that tot		tributed	Dates you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you conf		Dates you contributed	value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrupt or gambling?	cy or since you filed for bankru	ptcy, did you lose anythin	g because of theft,	fire, other disaster,
	No Yes. Fill in the details.				
	Describe the property you lost and	Describe any insurance coveraç		Date of your	Value of property
		nclude the amount that insurance nsurance claims on line 33 of Sch	e nas paid. List pending	loss	lost
Par	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition prep	eparing a bankruptcy petition?			to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of transferred		Date payment or transfer was made	Amount of payment
	William R. Wooton 210 Main St Beckley, WV 25801-4613				\$815.00
	United States Bankruptcy Court 300 Virginia St E Rm 3200 Charleston, WV 25301-2528				\$335.00
	Dollar Learning Foundation 21900 Burbank Blvd Woodland Hills, CA 91367-6469				\$14.99

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	Carr, Darius Allen Jr. & Carr, Mel	inda Cheryl		Case number	(if known)		
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you li	s or to make payments			r transfer any propert	y to anyone who	
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value transferred	alue of any pro	perty	Date payment or transfer was made	Amount of payment	
 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do rights and transfers that you have already listed on this statement. No Yes. Fill in the details. 							
	Person Who Received Transfer Address	Description and very property transfer			any property or s received or debts xchange	Date transfer was made	
19.	Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.						
	Name of trust Description and value of the property transferred						
Par	8: List of Certain Financial Accounts, Inst	ruments. Safe Deposit	Boxes, and Stor	rage Units		made	
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details.	, were any financial accoun	counts or instru	ments held in			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of according trument	c m	ate account was losed, sold, loved, or ansferred	Last balance before closing or transfer	
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secucash, or other valuables? No Yes. Fill in the details.						ry for securities,	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe the	contents	Do you still have it?	
22.	Have you stored property in a storage unit of	r place other than your	home within 1 y	ear before yo	u filed for bankruptcy	?	
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S and ZIP Code)		Describe the	contents	Do you still have it?	
Dar	9. Identify Property You Hold or Control t	or Someone Fise					

raite. Identity Property Tod Hold of Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for

Case 2:20-bk-20051 Doc 1 Filed 02/07/20 Entered 02/07/20 13:44:38 Document Page 63 of 72 Debtor 1 Carr, Darius Allen Jr. & Carr, Melinda Cheryl Case number (if known) Debtor 2 someone. Nο Yes. Fill in the details. Value Owner's Name Where is the property? Describe the property (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Date of notice Governmental unit Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number case Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business

☐ An owner of at least 5% of the voting or equity securities of a corporation

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation

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. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

Fill in this	information to identify your cas	e:				x only as d	irected	in this form and	in Form
Debtor 1	Darius Allen Carr, J	lr.		122	2A-1Supp:				
Debtor 2 (Spouse, if fili	Melinda Cheryl Car	r			■ 1. There	is no pres	umptior	n of abuse	
United Sta	ntes Bankruptcy Court for the:	Southern District of West Beckley Division	t Virginia,		applie	es will be n	nade ur	mine if a presum nder <i>Chapter 7 Me</i> m 122A-2).	•
Case num (if known)	ber			'				ot apply now beca uld apply later.	iuse of qualified
					☐ Check	if this is a	an ame	ended filing	
Officia	l Form 122A - 1								
Chapt	er 7 Statement o	of Your Curren	t Mor	nthly Inc	ome				12/19
				<u> </u>					
a separate s number (if k military serv	lete and accurate as possible. If sheet to this form. Include the lin mown). If you believe that you arvice, complete and file Statement	ne number to which the addit re exempted from a presump nt of Exemption from Presum	ional infor	mation applies. use because you	On the top on the document of	of any addit e primarily	ional pa consum	ges, write your na er debts or becau	ame and case use of qualifying
Part 1:	Calculate Your Current Mo	nthly Income							
	t is your marital and filing sta	•							
□ No	ot married. Fill out Column A,	lines 2-11.							
■ м	arried and your spouse is fill	ing with you. Fill out both	Columns	A and B, lines 2	2-11.				
□м	arried and your spouse is NO	OT filing with you. You an	nd your s	pouse are:					
	Living in the same househo	ld and are not legally sep	arated. F	ill out both Colu	ımns A and	B, lines 2-	11.		
	Living separately or are lega penalty of perjury that you and apart for reasons that do not in	d your spouse are legally sep	parated ur	nder nonbankru	otcy law tha	t applies or			
101(10A) 6 months	e average monthly income that y). For example, if you are filing on s s, add the income for all 6 months a same rental property, put the incor	September 15, the 6-month pe and divide the total by 6. Fill in	riod would the result.	be March 1 throu Do not include ar	igh August 3° ny income an	 If the amonounce to the amo	unt of yo	our monthly income e. For example, if b	varied during the
					Column A Debtor 1		Debt	mn B or 2 or filing spouse	
payro	gross wages, salary, tips, boll deductions).				\$	0.00	\$	3,275.00	
Colur	ony and maintenance payme mn B is filled in.				\$	0.00	\$	0.00	
of yo from room	mounts from any source whit ou or your dependents, include an unmarried partner, members mates. Include regular contribut ot include payments you listed	ding child support. Includes of your household, your deutions from a spouse only i	e regular	contributions	 \$	0.00	\$	0.00	
5. Net i	ncome from operating a busi	ness, profession, or farm							
				otor 1					
	s receipts (before all deductions	<i>′</i>	0.00						
	nary and necessary operating ex	· -	0.00	Copy here ->	c	0.00	Ф	0.00	
	nonthly income from a busines	· · · · · · · · · · · · · · · · · · ·	0.00	copy nere ->	Ψ	0.00	\$	0.00	
6. Net ii	ncome from rental and other	reai property	Dek	otor 1					

Official Form 122A-1

0.00

0.00

0.00 Copy here -> \$

\$

0.00

0.00

\$

-\$

\$

0.00

0.00

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

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Debtor 1 Debtor 2 Carr, Darius Allen Jr. & Carr, Melinda Cheryl

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	pouse	1
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:		der the					
	For you \$	0.0						
	For your spouse \$	0.0						
	Pension or retirement income. Do not include any amounder the Social Security Act. Also, except as stated in the include any compensation, pension, pay, annuity, or allow Government in connection with a disability, combat-related a member of the uniformed services. If you received any 61 of title 10, then include that pay only to the extent that of retired pay to which you would otherwise be entitled if it title 10 other than chapter 61 of that title. Income from all other sources not listed above. Spenot include any benefits received under the Social Securi victim of a war crime, a crime against humanity, or internation compensation, pension, pay, annuity, or allowance paid be Government in connection with a disability, combat-related a member of the uniformed services. If necessary, list other contents in the contents of the uniformed services.	ne next sentence, do not wance paid by the United and injury or disability, or cretired pay paid under chit does not exceed the all retired under any provision cify the source and amount of the country Act; payments receive attional or domestic terror by the United States and injury or disability, or contents and the country or disability, or contents and the country or disability, or contents and the country of the United States and injury or disability, or contents and the country of the United States and the country of the Country of the United States and the country of the Cou	States death of napter mount on of ount. Do ed as a rism; or death of	\$	0.00	\$	0.00	
	a member of the uniformed services. If necessary, list our and put the total below.	ier sources on a separar	ie page					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	ı
11.	Calculate your total current monthly income. Add lin each column. Then add the total for Column A to the to		\$	0.00	+ \$	3,275.00	Total crincome	3,275.00
Part	··							
12.	Calculate your current monthly income for the year. 12a. Copy your total current monthly income from line 1	•		Сору	line 11 h	ere=>	\$	3,275.00
	Multiply by 12 (the number of months in a year)						x 1	2
	12b. The result is your annual income for this part of the	form				12b.	\$3	9,300.00
13.	Calculate the median family income that applies to y	ou. Follow these steps:						
	Fill in the state in which you live.	WV						
	Fill in the number of people in your household.	3						
	Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office.							
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official	Form 122A-2.			,		400.4	0
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A2.	л page т, спеск box 2 <i>,1</i>	ie presu	триоп от авс	ise is dete	enninea by Fo	IIII 122A-	۷.
Part	<u> </u>							
	By signing here, I declare under penalty of perjury the	nat the information on thi	s statem	nent and in an	y attachm	nents is true an	d correct	
	X /s/ Darius Allen Carr, Jr.			nda Cheryl				
	Darius Allen Carr, Jr. Signature of Debtor 1	N S	lelinda ignature	Cheryl Ca of Debtor 2	ırr			

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Debtor 1 Debtor 2	Carr, Darius Allen Jr. & Carr, Melinda Cheryl			Case number (if known)	
Da	te February 6, 2020	Date	February	6, 2020	
	MM / DD / YYYY		MM / DD /	YYYY	
	If any object of the AAs of NOT CIL or the City France AOOA O				

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 2:20-bk-20051 Doc 1 Filed 02/07/20 Entered 02/07/20 13:44:38 Desc Main

Document

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of West Virginia, Beckley Division

In	re Carr, Darius Allen Jr. & Carr, Melinda C		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF CO	MPENSATION OF ATT	ORNEY FOR	DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P compensation paid to me within one year before the rendered on behalf of the debtor(s) in contemple	ne filing of the petition in bankrupto	cy, or agreed to be p	aid to me, for services rende	ered or to
	For legal services, I have agreed to accept		\$	815.00	
	Prior to the filing of this statement I have received		\$	815.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.				
	☐ I have agreed to share the above-disclosed corcopy of the agreement, together with a list of t				firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	a. Analysis of the debtor's financial situation, andb. Preparation and filing of any petition, schedulec. Representation of the debtor at the meeting of dd. [Other provisions as needed]	s, statement of affairs and plan whi	ich may be required	-	tcy;
6.	By agreement with the debtor(s), the above-disclorated Counseling & Debtor Educated		ing service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement s bankruptcy proceeding.	of any agreement or arrangement	for payment to me f	or representation of the debt	or(s) in
	February 6, 2020	/s/ William R. W	ooton		
Date			William R. Wooton		
		Signature of Attorn Wooton & Woot			
		210 Main St Beckley, WV 25	801-4613		
		bill@wootonlaw	.com		
		Name of law firm			